

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Mar 02, 1999 8:00 am
Secretary of State

03-02-1999 90011 016 ***150.00

DOCUMENT # P94000046134

1. Corporation Name

SOUTHEASTERN CONSTRUCTION SALES COMPANY

Principal Place of Business

3081 E. COMMERCIAL BLVD
101
FT. LAUDERDALE FL 33308
US

Mailing Address

3081 E. COMMERCIAL BLVD
101
FT. LAUDERDALE FL 33308
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/15/1994

4. FEI Number

65-0499755

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax.

☐ Yes ☒ No

9. Name and Address of Current Registered Agent

HANTMAN, ARNOLD
3081 E. COMMERCIAL BLVD, SUITE 101
FT. LAUDERDALE FL 33308

10. Name and Address of New Registered Agent

81 Name ARNOLD HANTMAN
82 Street Address (P.O. Box Number is Not Acceptable)
3081 E. COMMERCIAL BLVD
83 SUITE #105
84 City FT. LAUDERDALE FL 85 Zip Code 33308

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12.

OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> DELETE
NAME	HANTMAN, ARNOLD	
STREET ADDRESS	3081 E. COMMERCIAL BLVD, SUITE 101	
CITY-ST-ZIP	FT. LAUDERDALE FL	
TITLE	P	<input type="checkbox"/> DELETE
NAME	DOCTORS, DONALD H	
STREET ADDRESS	3081 E. COMMERCIAL BLVD., SUITE 101	
CITY-ST-ZIP	FT. LAUDERDALE FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	D	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	ARNOLD HANTMAN	
1.3 STREET ADDRESS	3081 E. COMMERCIAL BLVD. SUITE #105	
1.4 CITY-ST-ZIP	FT. LAUDERDALE, FL 33308	
2.1 TITLE	P	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	DONALD H. DOCTORS	
2.3 STREET ADDRESS	3081 E. COMMERCIAL BLVD. SUITE #105	
2.4 CITY-ST-ZIP	FT. LAUDERDALE, FL 33308	
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Donald H. Doctors
DONALD H. DOCTORS

1/18/99

Date

954/771-1201

Daytime Phone #

CR2E034 (1/198)